

EMERGENCY DEPARTMENT AND URGENT CARE VISITS FOR HEAT-RELATED ILLNESS IN VIRGINIA

June 28-30, 2021

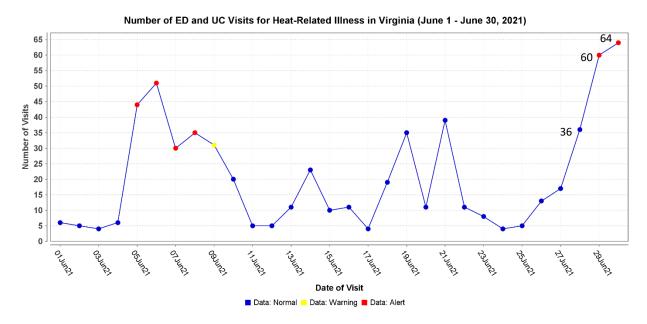
Background

At the time of this report, the Virginia Department of Health (VDH) received data on visits to 83 acute care hospital emergency departments (EDs), 21 free-standing EDs, and 66 urgent care centers (UCs) in Virginia for purposes of public health surveillance. This report characterizes ED and UC visit trends for heat-related illness.

See page 3 for data sources and case definitions used in this report.

Data Summary

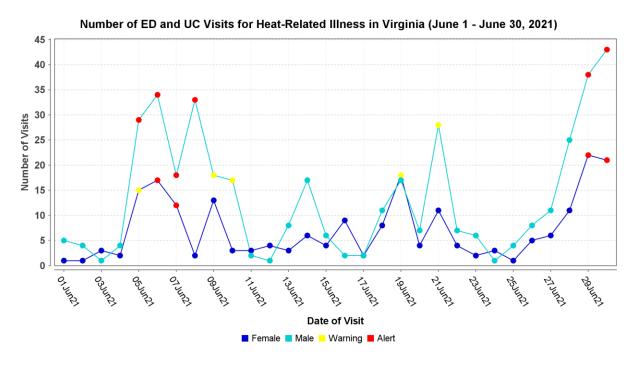
A total of **160 ED and UC visits for heat-related illness** occurred June 28-30, with 9% admitted to the hospital. The graph below displays the daily number of heat-related visits in Virginia between June 1 and June 30, 2021.

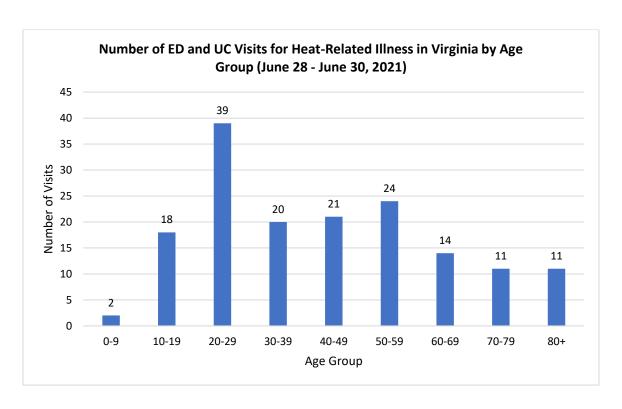


Number of ED and UC Visits for Heat-Related Illness in Virginia by Discharge Type (June 28-30, 2020)	
Discharge Type	Number of Visits (%)
Admitted	14 (9%)
Discharged to Home	132 (82%)
Not Reported	14 (9%)



Both males and females displayed a significant increase in heat-related visits but **males** accounted for **66%** (N=106) of visits June 28-30. The largest proportion of visits by age were among adults **20-29 years old** (24%, N=39) followed by ages 50-59 (15%) and 40-49 (13%). The graphs below show ED and UC heat-related illness visits in Virginia by sex and age group.

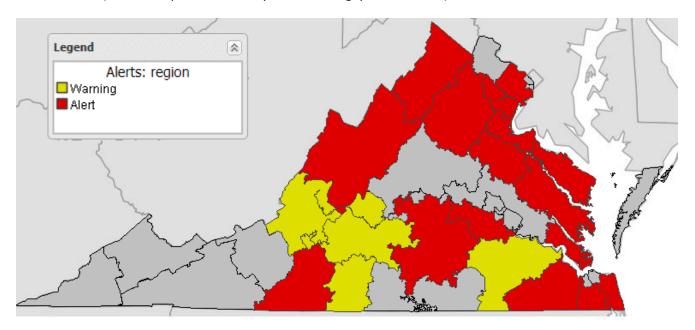




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The map below displays <u>VDH Health Districts</u> with significant increases in heat-related visits on June 28-30 compared to baseline levels. **20 VDH Health Districts** (out of 35) experienced elevated levels for heat-related illness (red alerts: p-value < 0.01; yellow warning: p-value < 0.05).



Health Districts with elevated visits include 6 in the Eastern Region (Chesapeake, Hampton, Peninsula, Three Rivers, Virginia Beach, Western Tidewater), 2 health districts in the Northern Region (Fairfax, Prince William), 5 in the Southwest (Alleghany, Central Virginia, Pittsylvania-Danville, Roanoke City, West Piedmont), 4 in the Northwest (Central Shenandoah, Lord Fairfax, Rappahannock, Rappahannock Rapidan), and 3 in Central (Chesterfield, Crater, Piedmont).

Data Sources

VDH analyzes chief complaints and discharge diagnoses of ED and UC visits to identify and monitor issues of public health concern across Virginia. The chief complaint is a free-text field capturing the patient's primary reason for seeking medical care as interpreted by the ED registration staff. The discharge diagnosis is a coded field that uses standardized values outlined by the International Classification of Diseases (ICD) 10th Revision and SNOMED Clinical Terms (CT) code sets. Readers are strongly encouraged to review syndromic surveillance data limitations when interpreting this report.

Case Definitions

ED and UC visits for **heat-related illness** were identified based on the <u>Heat-Related Illness Syndrome</u> <u>Query</u> definition published by the Council of State and Territorial Epidemiologists (CSTE) using the following terms for Chief Complaint and Discharge Diagnosis: *heat exhaustion; heat exposure; heat cramps; heat stroke; hyperthermia;* ICD-10 codes: *T67, X30.;* and SNOMED CT codes: *95868006, 95867001*.